

Via Facsimile: 9-1-571-273-8300

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**310.00****Complete if Known**

Application Number	10/612539
Filing Date	07/02/2003
First Named Inventor	CRANE, Laura J
Examiner Name	Kavanaugh, John T.
Art Unit	3728
Attorney Docket No.	FC01093Q2

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MAY 24 2006**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 19-0365 Deposit Account Name: Schering-Plough Corporation

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20						
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
- 3 or HP =	x	=				
HP = highest number of independent claims paid for, if greater than 3						

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Terminal Disclaimer and IDS

**Fees Paid (\$)**

310

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	35161	Telephone	908-298-4741
Name (Print/Type)	MATTHEW J. GOLDEN	Date	May 24, 2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FROM:  
**Matthew J. Golden**

PHONE NUMBER:  
(908) 298-4741

TOTAL NO. OF PAGES INCLUDING COVER  
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DATE  
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Re: Application No. 10/612,539  
Examiner: Kavanaugh, John T.  
In Re Application of Laura J. Crane  
Filed: 07/02/2003  
Group Art Unit: 3728  
For: Gel Insoles with Lower Heel and Toe Recesses Having Thin spring Walls  
Attorney Docket No.: FC01093Q2

Dear Sir/Madam:

Transmitted herewith are:

- Fax Cover Sheet – 1 page
- Certificate of Fax Transmission (sb97) – 1 page
- Transmittal Form (sb21) – 1 page
- Amendment – 8 pages
- Information Disclosure Statement Transmittal – 2 pages
- PTO Form 1449 (sb/08a) – 1 page (10 references cited; 0 references transmitted)
- Terminal Disclaimer – 2 pages
- Petition for Extension of time (sb/22) (3 months) – 1 page IN DUPLICATE
- Fee Transmittal (sb/17) – 1 page IN DUPLICATE

  
Matthew J. Golden  
Patent Director, Reg. No. 35,161

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PHONE: (908) 298-4741

FAX: (908) 298-5388

Docket Number: FC01093Q2  
Application No: 10/612539  
Filing Date: 07/02/2003  
First Inventor: CRANE, Laura J

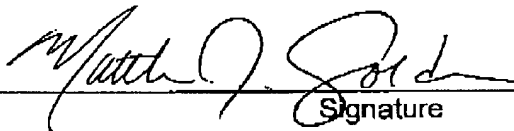
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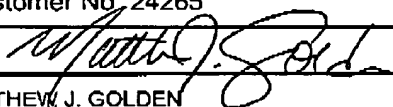
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/612539	
	Filing Date	07/02/2003	
	First Named Inventor	CRANE, Laura J	
	An Unit	3728	
	Examiner Name	Kavanaugh, John T.	
Total Number of Pages in This Submission	20	Attorney Docket Number	FC01093Q2

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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Customer No: 24265		
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Printed name	MATTHEW J. GOLDEN		
Date	May 24, 2006	Reg. No.	35161

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